

Commission on Governmental Ethics and Election Practices Mail: 135 State House Station, Augusta, Maine 04333 Office: 45 Memorial Circle, Augusta ME, 04333

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2022 CAMPAIGN FINANCE REPORT

FOR ALL POLITICAL ACTION COMMITTEES, BALLOT QUESTION COMMITTEES, & STATE PARTY COMMITTEES

Please complete ALL ent	ries.				
NAME OF COMMITTEE					
STREET					☐ CHECK IF
CITY AND ZIP CODE			TELEPHONE NUMBER		FROM PREVIOUS REPORT
E-MAIL					
NAME OF TREASURER					
MAILING ADDRESS STREET					☐ CHECK IF
CITY AND ZIP CODE			TELEPHONE NUMBER		FROM PREVIOUS REPORT
E-MAIL					
Type of R	eport	Due Date		Dates of Report Period	<u>I</u>
☐ Initial PAC Report		Seven (7) days after Registration	\$	Start of Year - date of registra	ition
☐ Initial BQC Report		Seven (7) days after Registration	Sta	rt of Campaign – date of regis	stration
☐ April Quarterly Repo	rt	April 11, 2022		January 1 – March 31, 202	2
☐ 11-Day Pre-Primary I	Report	June 3, 2022		April 1 - May 31, 2022	
☐ 42-Day Post-Primary	Report	July 26, 2022		June 1 – July 19, 2022	
☐ October Quarterly R	eport	October 5, 2022		July 20 - September 30, 202	22
☐ 11-Day Pre-General I	Report	October 28, 2022		October 1 - October 25, 202	22
☐ 42-Day Post-General	Report	December 20, 2022		October 26 – December 13, 2	022
☐ January Quarterly Ro	eport	January 17, 2023	D	December 14 – December 31,	2022
☐ Amendment to:					
		ttee had no contributions and no ex Check the appropriate report above a		l did not incur any unpaid del	bts or
☐ Termination Report:	If the committee will	have no further activity. Check the a	appropriate rep	oort above as well.	
I CERTIFY THAT I HA AND COMPLETE.	AVE EXAMINED TH	IIS REPORT AND TO THE BES	T OF MY KNO	OWLEDGE IT IS TRUE, C	ORRECT,
Treasure	er's or Principal O	fficer's Signature	_	Da	ate

PAC/BQC Name:	Page of	
	Schedule A only	

SCHEDULE A CASH CONTRIBUTIONS

- For contributors who gave more than \$50, the committee must report the contributor's name, address, occupation, and employer.
- If employment information has been requested from the contributor and the contributor has not provided it, indicate "information requested" for the occupation and employer.
- For cash contributions totaling \$50 or less, please enter "unitemized contributions" as the contributor and the total amount and the appropriate key code on a line on this page. Once a contributor has given the committee more than \$50 in a report period, you must list that contributor separately.
- Duplicate as needed.

DATE RECEIVED	CONTRIBUTOR'S NAME, ADDRESS, ZIP	OCCUPATION AND EMPLOYER	TYPE (use key code)	AMOUNT
Total cash contributions (this page only) ⇒ (combined totals from all Schedule A pages must be listed on Schedule F				

Key Codes:

1 = Individuals 7 = Ballot Question Committee

3 = Commercial Source 9 = Candidate/Candidate Committees

4 = Non Profit Organization 10 = General Treasury Transfer

5 = Political Action Committee 12 = Contributors giving \$50 or Less

6 = Political Party Committee 16 = Financial Institution

PAC/BQC Name:	Page of
	Schedule A-1 only

SCHEDULE A-1 IN-KIND CONTRIBUTIONS

- In-kind contributions are goods and services (including facilities) that a committee received at no cost or at a cost less than the fair market value. They include all goods and services purchased for the committee by others if the committee does not expect to reimburse the person who made the purchase.
- For contributors who gave more than \$50, the committee must report the contributor's name, address, occupation, and employer.
- If employment information has been requested from the contributor and the contributor has not provided it, indicate "information requested" for the occupation and employer.
- For contributions totaling \$50 or less, please enter "unitemized contributions" as the contributor and the total amount and the appropriate key code on a line on this page. Once a contributor has given the committee more than \$50 in a report period, you must list that contributor separately.
- Duplicate as needed.

DATE RECEIVED	CONTRIBUTOR'S NAME, ADDRESS, ZIP	OCCUPATION AND EMPLOYER	DESCRIPTION (of goods, services, facilities, or discounts received)	TYPE (use key code)	VALUE (estimated fair market value)
Total in-kind contributions (this page only) ⇒ (combined totals from all Schedule A-1 pages must be listed on Schedule F)					

Key Codes:

1 = Individuals 7 = Ballot Question Committee

3 = Commercial Source 9 = Candidate/Candidate Committees

4 = Non Profit Organization 10 = General Treasury Transfer

5 = Political Action Committee 12 = Contributors giving \$50 or Less

16 = Financial Institution

6 = Political Party Committee

PAC/BQC Name:	 Page of
	Schedule B only

SCHEDULE B EXPENDITURES TO SUPPORT OR OPPOSE

- Enter all expenditures, including cash contributions from this committee, made to support or oppose a candidate, political action committee, ballot question committee, or party committee.
- Enter all expenditures made to support or oppose a ballot question, referendum, or citizen initiative, including expenditures made in the signature-gathering phase.
- Enter the name of the candidate, ballot question, or committee supported or opposed by the expenditure and indicate whether the expenditure was made in support or opposition.
- Duplicate as needed.

If a single expenditure is made to support or oppose multiple candidates, committees, or ballot questions, the expenditure must be itemized by the amount spent per candidate, committee, or ballot question, not as a single expenditure, and each candidate, committee, or ballot question must be identified.

	-	EXPENDIT	JRE T	YPES	
	1	_//	J. ()		
APP	Apparel (t-shirts, hats, embroidery, etc.) PER Personnel and campaign staff, consulting, a			Personnel and campaign staff, consulting, an	d independent contractors
CON	Contrib	ution to party committee, non-profit, other	PHO	Phones (phone banking, robocalls, and texts)	
EQP		ent of \$50 or more (computer, tablet, phone, furniture, etc.)	POL	Polling and survey research	
EVT	Campai supplies	ign and fundraising events (venue/booth rental, entertainment, s, etc.)	POS	Postage for US Mail and mailbox fees	
FOD	Food fo	or campaign events or volunteers, catering	PRO	Professional services (graphic design, legal s	ervices, web design)
HRD	Hardwa	are and small tools (hammer, nails, lumber, paint, etc.)	RAD	Radio ads and production costs only	
LIT	Printed	campaign materials (palmcards, signs, stickers, flyers etc.)	TKT	Entrance cost to event (bean suppers, fairs, p	party events, etc.)
MHS	Mail ho	use and direct mail (design, printing, mailing, and postage)	TRV	Travel (mileage and lodging, etc.)	
OFF	Office s	supplies, rent, utilities, internet service, phone minutes/data	TVN	TV/Cable ads, production, and media buyer of	costs only
ONL	Social r	nedial and online advertising only	WEB	Website and internet costs (website domain a	and registration, etc.)
ОТН	Other a	nd fees (bank, contribution, and money order fees, etc.)			
		! REMARKS REQUIRED ON	ALL EXP	PENDITURE TYPES!	
Date:		Payee Name and Address:			Amount
T		Describe (Describe IV)			
Type:		Remarks (Required):			
☐ Sur	oport	Candidate Name/Ballot Question:			
∐ Op _l	pose				
Date:		Payee Name and Address:			Amount
Tymay		Domorko (Doguirod)			
Type:		Remarks (Required):			
☐ Sur	oport	Candidate Name/Ballot Question:			
	pose				
	•	Total	expen	ditures this page only ⇒	
(combined totals from all Schedule B pages must be listed on Schedule F)					
(committee totale in our air constant 2 pages must be noted on constant 1)					

PAC/BQC Name:

⊃age	of
Schedul	e B only

SCHEDULE B (continued) EXPENDITURES TO SUPPORT OR OPPOSE

Date:	Payee Name and Address:	Amount
Type:	Remarks (Required):	
☐ Support	Candidate Name/Ballot Question:	
Oppose		
Date:	Payee Name and Address:	Amount
Туре:	Remarks (Required):	
турс.	Tremains (required).	
☐ Support	Candidate Name/Ballot Question:	
☐ Oppose		
Date:	Payee Name and Address:	Amount
Type:	Remarks (Required):	
Support	Candidate Name/Ballot Question:	
☐ Oppose		
Date:	Payee Name and Address:	Amount
Type:	Remarks (Required):	
☐ Support	Candidate Name/Ballot Question:	
☐ Oppose		
	Payee Name and Address:	A
Date:		Amount
Type:	Remarks (Required):	
- 71		
	Condidate Name/Pallet Question:	
☐ Support	Candidate Name/Ballot Question:	
☐ Oppose		
	Total expenditures this page only ⇒	
	(combined totals from all Schedule B pages must be listed on Schedule F)	
	,	

PAC/BQ0	C Nam	ne:				of ule B-1 only
		SC OPER	HEDU		-1	ule B-1 only
fo ir	or bank n the re	operational expenditures made to a single payer fees and vehicle travel may be aggregated and emark section.	ee or cred	ditor that	were made during this reporting period. N	
• [Ouplica	te as needed EXPE	NDITU	JRE T	YPES	
APP	Appar	rel (t-shirts, hats, embroidery, etc.)		PER	Personnel and campaign staff, consulting, and indepe	ndent contractors
CON		ibution to party committee, non-profit, other		PHO	Phones (phone banking, robocalls, and texts)	Hadrit definitioners
EQP	1	ment of \$50 or more (computer, tablet, phone, furniture, etc.)		POL	Polling and survey research	
EVT	Camp	aign and fundraising events (venue/booth rental, entertainme		POS	Postage for US Mail and mailbox fees	
FOD	1	es, etc.) for campaign events or volunteers, catering		PRO	Professional services (graphic design, legal services,	web design)
HRD		vare and small tools (hammer, nails, lumber, paint, etc.)		RAD	Radio ads and production costs only	
LIT	Printe	d campaign materials (palmcards, signs, stickers, flyers etc.)		TKT	Entrance cost to event (bean suppers, fairs, party ever	nts, etc.)
MHS	Mail h	ouse and direct mail (design, printing, mailing, and postage)		TRV	Travel (mileage and lodging, etc.)	
OFF	Office	supplies, rent, utilities, internet service, phone minutes/data		TVN	TV/Cable ads, production, and media buyer costs only	,
ONL	Socia	medial and online advertising only		WEB	Website and internet costs (website domain and regist	tration, etc.)
OTH	Other	and fees (bank, contribution, and money order fees, etc.)				
		! REMARKS REQUIF	RED FOR	ALL EXP	ENDITURE TYPES !.	
DATE	E	PAYEE NAME & ADDRESS	TY	PE	REMARKS (REQUIRED)	AMOUNT

Total expenditures (this page only) \Rightarrow

(combined totals from all Schedule B-1 pages must be listed on Schedule F)

Page _	of	
Sched	ule B-1	only

SCHEDULE B – 1 (continued) OPERATING EXPENSES

DATE	PAYEE NAME & ADDRESS	TYPE	REMARKS (REQUIRED)	AMOUNT
Total expenditures (this page only) ⇒				
(combined totals from all Schedule B-1 pages must be listed on Schedule F)				

PAC/BQC Name:	Page of
	Schedule C only

SCHEDULE C LOANS AND REPAYMENTS

• List all new and continuing loans that were unpaid at any time during this reporting period. If a loan amount is forgiven, the amount forgiven **must** also be entered as a contribution on Schedule A.

Duplicate as needed.

Duplicate as needed.					
	COLUMN 1	COLUMN 2	COLUMN 3	COLUMN 4	COLUMN 5
LENDER'S NAME AND ADDRESS	LOAN BALANCE AT BEGINNING OF PERIOD	ACTIVITY THIS PERIOD (report amount and date)			LOAN BALANCE AT
		AMOUNT LOANED THIS PERIOD	AMOUNT REPAID THIS PERIOD	AMOUNT FORGIVEN THIS PERIOD (Enter on Schedule A also)	END OF PERIOD (1+2) – 3 – 4
		DATE	DATE	DATE	
		AMOUNT	AMOUNT	AMOUNT	
		DATE	DATE	DATE	
		AMOUNT	AMOUNT	AMOUNT	
		DATE	DATE	DATE	
		AMOUNT	AMOUNT	AMOUNT	
		DATE	DATE	DATE	
		AMOUNT	AMOUNT	AMOUNT	
		DATE	DATE	DATE	
		AMOUNT	AMOUNT	AMOUNT	
		DATE	DATE	DATE	
		AMOUNT	AMOUNT	AMOUNT	
Totals for each column ⇒		Enter on Schedule F, Line 3	Enter on Schedule F, Line 7		Enter on Schedule F, Line 14

PAC/BQC Name:	Page of
	Schedule D only
SCH	EDULE D
UNPAID DEBTS	AND OBLIGATIONS
A debt or obligation is incurred if a committee places an or	rder for a good or service without making a payment; makes a promise

- A debt or obligation is incurred if a committee places an order for a good or service without making a payment; makes a promise or
 agreement to pay for a good or service; signs a contract for a good or service; or receives delivery of a good or service for which the
 committee has not paid.
- This schedule is a list of all unpaid debts and obligations of the committee as of the end of this reporting period. When the obligation has been paid, the expenditure (i.e., the actual payment) must be reported on Schedule B or B-1.
- If the committee has not received a bill for goods or services, contact the vendor to obtain the amount owed. If it is impossible to verify the amount of the debt, enter an estimated amount and indicate that the amount is estimated in the purpose section.
- If obligations from a previous campaign finance report still remain unpaid, you will need to continue to report them on this schedule until they have been paid in full.
- Duplicate as needed.

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DATE OF OBLIGATION	CREDITOR'S NAME AND ADDRESS	PURPOSE	AMOUNT
Total unpaid debts and obligations (this page only) ⇒			
(combined totals from all Schedule D pages must be listed on Schedule F)			

PAC/BQC Name:		

SCHEDULE F SUMMARY SCHEDULE

CASH ACTIVITY

Receipts	Total for this Period
Cash Contributions (Schedule A)	
2. Other Cash Receipts (interest, etc.)	
3. Loans (Schedule C)	
4. Total Receipts (lines 1 + 2 + 3)	
Expenditures	Total for this Period
5. Expenditures to Support or Oppose (Schedule B)	
5. Expenditures to Support or Oppose (Schedule B)6. Operating Expenditures (Schedule B-1)	
6. Operating Expenditures (Schedule B-1)	

CASH SUMMARY

	Total for This Period
9. Cash Balance at Beginning of Period	
10. Plus Total Receipts This Period (line 4 above)	
11. Minus Total Payments This Period (line 8 above)	
12. Cash Balance at End of Period	

OTHER ACTIVITY

	Total for This Period
13. In-Kind Contributions (Schedule A-1)	
14. Total Loan Balance at End of Period (Schedule C)	
15. Total Unpaid Debts at End of Period (Schedule D)	